| * PATENT APPLICATION  | ON FEE DETERM<br>tive October 1, 20 | 1 4 5 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | RD                                      | 081                                | Цr.   | ) j) = 0.   | 06                            |
|---|-------------------------------------|---|---|------------------------------------|-------|---|-------------------------------|
| CLAIMS A  | S FILED - PART                      | (Column 2)                              | SMALL<br>TYPE                           | ENTITY                             | OR    | OTHER<br>SMALL  | THAN.                         |
| TOTAL CLAIMS  | 213                                 |   | RATE                                    | E 是 FEE 经                          |       | RATE  | % FEE                         |
| FOR   | NUMBER FILED                        | NUMBER EXTRA                            | BASIC                                   | EE 355.00                          | OR    | BASIC FEE   | 710.00                        |
| TOTAL CHARGEABLE CLAIMS   | U3 minus 20=                        | . 23                                    | X\$ 9                                   |                                    |       | X\$18=  | Ciril                         |
| INDEPENDENT CLAIMS  | minus 3 =                           | · b                                     | 45/19/24                                | men ikozinelali<br>1808 dingga omb | OR    | - X80=  | 7/4                           |
| MULTIPLE DEPENDENT CLAIM P  |                                     |   | X40                                     |                                    | OR    | <b>NOU=</b>   |                               |
|   |                                     |   |   |                                    | OR    | <b>+270=</b> ),   |                               |
| If the difference in column 1 is less than zero, enter "0" in column 2  |                                     |   |   | L BLAZ                             | OR    | TOTAL   | 124                           |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |                                     |   |   | L ENTITY:                          | OR    | OTHER   | <b>企业中共和国 (本)</b> (1) (1) (1) |
| (Column I)  | HIGH                                | HEST-                                   | SMAI                                    |                                    | ]<br> |   | ADDI                          |
| REMAINING AFTER   | PREVI                               | MBER PRESENT OUSLY EXTRA                | RATE                                    | <b>南京</b> 2000年中华公司公司              |       | RATE*   | TIONAL                        |
| REMAINING AFTER AMENDMENT. Total  | Minus                               | FOR C                                   | X\$ 9                                   | CE TOTAL SE                        |       | 1X\$18≝⊭  | ree .                         |
| Independent .   | Minus                               |   | ALC: ALC: ALC: ALC: ALC: ALC: ALC: ALC: |                                    | OR    | les de la composition |                               |
| FIRST PRESENTATION OF M   | ULTIPLE DEPENDEN                    | TCLAIM                                  | X40                                     |                                    | QR .  | ¥ X80≜*   |                               |
|   |                                     |   | +135                                    |                                    | OR    | +270≡   |                               |
|   |                                     |   | TO1<br>ADDIT. F                         |                                    | OR    | ****TOTAL<br>ADDIT: FEE   | TEN SE                        |
| (Column 1)  |                                     | imn 2) (Column 3)                       |   |                                    |       |   |                               |
| REMAINING AFTER   | NUN                                 | MBER PRESENT                            | RATE                                    | ADDI-7                             |       | RATE  | ADDI:                         |
| REMAINING AFTER AMENDMENT Total   | PAIC                                | FOR                                     |   | FEE                                |       |   | FEE                           |
|   | Minus **                            |   | X\$ 9                                   |                                    | OR    | .X\$18≡.  |                               |
| Ind pendent • FIRST PRESENTATION OF M   | Minus ***                           | T CLAIM                                 | X40=                                    |                                    | OR    | X80=  |                               |
| STINGT FRESENTATION OF W  | OLTIFLE DEFENDEN                    | T CLAIM                                 | +135                                    |                                    | OR    | +270=   |                               |
|   |                                     |   | TOT                                     | AL                                 |       | TOTAL   | <b>海南岛村</b>                   |
| (Column 1)  | (Colu                               | ımn 2) (Column 3)                       | ADDIT. F                                | EE E                               |       | ADDIT. FEE  |                               |
|   | HIG                                 | HEST MBER PRESENT                       | ] [                                     | ADDI-                              |       |   | ADDI-                         |
| ÀFTER AMENDMENT   | PREV                                | IOUSLY EXTRA                            | RATE                                    | TIONAL<br>FEE                      | いき    | RATE  | TIONAL                        |
| Total   | Minus **                            | =                                       | X\$ 9                                   |                                    |       | X\$18=  |                               |
| CLAIMS REMAINING AFTER AMENDMENT Total Ind pendent  FIRST PRESENTATION OF A   | Minus ***                           | =                                       | X40=                                    |                                    | OR    | *   |                               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                     |   |   |                                    | OR.   | X80=  |                               |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                                     |   |   | = ,                                | OR    | +270=   |                               |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                                     |   |   | AL<br>EE                           | OR    | TOTAL<br>ADDIT. FEE   |                               |
| The "High st Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   |                                     |   |   |                                    |       |   |                               |